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# Indiana State Department of Health

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## Vaccine E-Letter # 239

**05/25/2007**

[www.statehealth.in.gov/programs/immunization.htm](http://www.statehealth.in.gov/programs/immunization.htm)

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### Measles Exposure For Some Hoosiers

In response to a confirmed measles case reported at the Intel International Science and Engineering Fair in Albuquerque, New Mexico, the ISDH is contacting Indiana residents known to have attended the fair from May 12-May 16.

The New Mexico Department of Health offered the MMR vaccine to those in attendance with unknown immunization histories. Some Indiana residents chose to receive the MMR prior to returning home.

ISDH has found that most attendees contacted have proof of vaccine history or other proof of immunity to measles.

Symptoms would most likely occur between May 22-June 3. The symptoms of measles are:

- Cough, runny nose, and red or sensitive eyes

Followed by:

- High fever
- Rash (normally appearing 3 days after the cold-like symptoms occur) The rash usually starts on the face and proceeds downward usually covering the entire body.

For more information contact: Karee Buffin: 317-233-7112.

## 2007 Immunization Schedules

The 2007 Immunization Schedules are now placed on the ISDH website. Go to: [http://www.in.gov/isdh/programs/immunization/ImmunizationSchedules/index\\_schedule\\_s.htm](http://www.in.gov/isdh/programs/immunization/ImmunizationSchedules/index_schedule_s.htm).

## Clarification of HPV VFC Eligibility

There have been a substantial number of questions concerning which girls are eligible to receive HPV vaccine supplied by ISDH. Our current policy only allows VFC eligible girls 9 through 18 years of age to receive this vaccine. We will be reviewing this policy in the future to evaluate if expansion of this policy is possible. Until then, providers are to follow the policy. Please watch the *Vaccine E-Letter* for future information.

## HPV Materials Available

CDC has recently updated their HPV brochure for clinicians and posted four sets of counseling messages to assist providers in their HPV-related discussions with patients. The counseling messages address (1) information for parents about the HPV vaccine, (2) information for women about the Pap and HPV tests, (3) information for women who receive a positive HPV test result, and (4) information for patients receiving a genital warts diagnosis.

These materials are now available online as separate PDF files at [www.cdc.gov/std/hpv/hpv-clinicians-brochure.htm](http://www.cdc.gov/std/hpv/hpv-clinicians-brochure.htm). They are also being printed as a package (brochure with counseling insert cards) for free online ordering. We will let you know as soon as they are available in print.

In the meantime, we hope you find these resources useful and ask that you please share them with other providers.

## Influenza-Associated Pediatric Mortality And The Increase Of Staphylococcus Aureus Co-Infection

Since 2004, the Influenza-Associated Pediatric Mortality Surveillance System, part of the Nationally Notifiable Disease Surveillance System, has collected information on deaths among children due to laboratory-confirmed influenza, including the presence of other medical conditions and bacterial infections at the time of death. From October 1, 2006 through May 7, 2007, 55 deaths from influenza in children have been reported to CDC from 23 state health departments and two city health departments. Data on bacterial co-infections were reported for 51 cases; 20 (39%) had a bacterial co-infection, and 16/20 were infected with *Staphylococcus aureus*. While the number of pediatric influenza associated deaths is similar to that reported during the two previous years, there has been an increase in the number of deaths in which both influenza and pneumonia or bacteremia due to *S. aureus* were identified. Only one influenza and *S. aureus* co-infection was identified in 2004-2005, and 3 were identified in 2005-2006. Of

the 16 children reported with *S. aureus* so far in 2006-2007, 11 children had methicillin-resistant (MRSA) isolated from a sterile site (9) or sputum (2), and 5 had methicillin-susceptible *S. aureus* isolated from a sterile site (3) or sputum (2). The median age of children with *S. aureus* co-infection was older than children without *S. aureus* co-infection (11 years versus 4 years,  $p < .01$ ). Children with influenza and *S. aureus* co-infections were reported to be in good health before illness onset but progressed rapidly to severe illness. Influenza strains isolated from these children have not been different from common strains circulating in the community and the MRSA strains have been typical of those associated with MRSA skin infection outbreaks in the United States.

Healthcare providers should be aware of the possibility of bacterial co-infection among children with influenza, and request bacterial cultures when bacterial co-infection is suspected. Clinicians, clinical agencies, and medical examiners are asked to contact their local or state health department as soon as possible when deaths among children due to laboratory-confirmed influenza are identified.

If you have any questions about this Health Advisory, please call CDC's Influenza Division, Epidemiology and Prevention Branch at (404) 639-3727.

Contact us at [Immunize@isdh.IN.gov](mailto:Immunize@isdh.IN.gov)

The Indiana State Department of Health's Immunization Program encourages all providers to contact us with questions and comments regarding vaccine related medical issues, vaccine use, VFC eligibility and other immunization and vaccine related policy questions that affect your ability to provide immunization services.

In addition to standard e-mail, telephone and fax access, the Immunization Program has recently implemented the [Immunize@isdh.IN.gov](mailto:Immunize@isdh.IN.gov) email as an additional way to ensure that providers are able to reach us and receive prompt and accurate answers to their questions.

[Immunize@isdh.IN.gov](mailto:Immunize@isdh.IN.gov) is our new dedicated e-mail address that providers can use to direct questions, comments and feedback to the Immunization Program. One of the benefits of using [Immunize@isdh.IN.gov](mailto:Immunize@isdh.IN.gov) is that your inquiry will be forwarded to the appropriate program or technical expert for consideration and response. Your response will be in writing, which can be filed for future reference. In addition, providers will be able to share questions and answers and changes in State or national policy, quickly and accurately with their colleagues.

We encourage your feedback and hope that you have the opportunity to try out [Immunize@isdh.IN.gov](mailto:Immunize@isdh.IN.gov) soon.

Happy Memorial Day!

